## Case 17-82691 Doc 1 Filed 11/13/17 Entered 11/13/17 09:55:09 Desc Main Document Page 1 of 54

| Chapter you are filing under: |                                       |   |
|-------------------------------|---------------------------------------|---|
| ☐ Chapter 7                   |                                       |   |
| ☐ Chapter 11                  |                                       |   |
| ☐ Chapter 12                  |                                       |   |
| ■ Chapter 13                  |                                       | neck if this an<br>nended filing                        |
|                               | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ■ Chapter 13 ☐ Ch |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1:   | Identify Yourself   |  |   |   |
|-----|---|---|--|---|---|
|     |   |   | About Debtor 1:  |   | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | You   | r full name   |  |   |   |
|     | your<br>pictu<br>exar<br>licer<br>Bring<br>iden | e the name that is on government-issued ure identification (for nple, your driver's use or passport).  g your picture tification to your ting with the trustee. | Delbert First name  A Middle name Scott, II Last name and Suffix (Sr., Jr., II, III) | - | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
|     | mee   | ung wur me musiee.  | <b>,</b> ,   |   | , ,   |
| 2.  |   | other names you have<br>d in the last 8 years   |  |   |   |
|     |   | de your married or<br>den names.  |  |   |   |
| 3.  | you<br>num<br>Indi                              | the last 4 digits of<br>r Social Security<br>sber or federal<br>vidual Taxpayer<br>tification number  | xxx-xx-9505  |   |   |

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Case number (if known)

Debtor 1 Delbert A Scott, II

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |  |  |
| 5. | Where you live   | 510 Whittemore Dr   | If Debtor 2 lives at a different address:  |  |  |
|    |  | South Beloit, IL 61080  Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |  |  |
|    |  | Winnebago<br>County   | County   |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |  |  |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |
|    |  |   |  |  |  |

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Case number (if known) Debtor 1 Delbert A Scott, II

| ar  | Tell the Court About  | Your I   | Bankruptcy Ca | ise                                |                     |                |                      |  |                            |
|-----|---|--|---------------|------------------------------------|---------------------|----------------|----------------------|--|----------------------------|
| 7.  | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11 |               |                                    |                     |                |                      |  |                            |
|     | choosing to file under  |  |               |                                    |                     |                |                      |  |                            |
|     |   |  |               |                                    |                     |                |                      |  |                            |
|     |   |  | Chapter 12    |                                    |                     |                |                      |  |                            |
|     |   |  | Chapter 13    |                                    |                     |                |                      |  |                            |
|     |   |  |               |                                    |                     |                |                      |  |                            |
| 3.  | How you will pay the fee  |  | about how yo  | ou may pay. Typ<br>attorney is sub | oically, if you are | e paying the f | ee yourself, you m   | erk's office in your local<br>nay pay with cash, cash<br>rney may pay with a cre | nier's check, or money     |
|     |   |  |               |                                    | tallments. If yo    |                | option, sign and     | attach the Application f   | or Individuals to Pay      |
|     |   |  | I request tha | it my fee be wa                    | aived (You may      | request this   | option only if you a | are filing for Chapter 7.  | By law, a judge may,       |
|     |   |  |               |                                    |                     |                |                      | less than 150% of the sections. If you choose this op                            | official poverty line that |
|     |   |  |               |                                    |                     |                |                      | BB) and file it with your  |                            |
|     |   |  |               |                                    |                     |                |                      |  |                            |
| ).  | Have you filed for bankruptcy within the  | ■ N  | lo.           |                                    |                     |                |                      |  |                            |
|     | last 8 years?   | ПΥ   | es.           |                                    |                     |                |                      |  |                            |
|     |   |  | District      |                                    |                     | When           |                      | Case number  |                            |
|     |   |  | District      |                                    |                     | When           |                      | Case number  |                            |
|     |   |  | District      |                                    |                     | When           |                      | Case number  |                            |
|     | And any bankening   |  |               |                                    |                     |                |                      |  |                            |
| υ.  | Are any bankruptcy cases pending or being   | ■ N  | lo            |                                    |                     |                |                      |  |                            |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ΠY   | es.           |                                    |                     |                |                      |  |                            |
|     |   |  | Debtor        |                                    |                     |                |                      | Relationship to you  |                            |
|     |   |  | District      |                                    |                     | When           |                      | Case number, if know   | n                          |
|     |   |  | Debtor        |                                    |                     |                |                      | Relationship to you  |                            |
|     |   |  | District      |                                    |                     | When           |                      | Case number, if know   | n                          |
| 11. | Do you rent your  | ■ N  | lo. Go to I   | ine 12.                            |                     |                |                      |  |                            |
|     | residence?  | ПΥ   | es. Has yo    | our landlord obta                  | ained an evictio    | n judgment a   | gainst you and do    | you want to stay in you  | ur residence?              |
|     |   |  |               | No. Go to line                     | 12.                 |                |                      |  |                            |
|     |   |  |               | Yes. Fill out In                   | nitial Statement .  | About an Evid  | ction Judgment Ag    | ainst You (Form 101A)  | and file it with this      |
|     |   |  | _             | bankruptcy pe                      |                     |                | , ,                  | ,  |                            |
|     |   |  |               |                                    |                     |                |                      |  |                            |

Page 4 of 54 Document Case number (if known) Debtor 1 Delbert A Scott, II Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Page 5 of 54 Document Case number (if known) Debtor 1 Delbert A Scott, II

Part 5:

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |  |
|--|--|
| counseling because of:                               |  |

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 54 Document Case number (if known) Debtor 1 Delbert A Scott, II Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Delbert A Scott, II Signature of Debtor 2 Delbert A Scott, II Signature of Debtor 1 Executed on November 13, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Delbert A Scott, II Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jacob Maegli<br>Signature of Attorney for Debtor | Date          | November 13, 2017<br>MM / DD / YYYY |
|--|---------------|-------------------------------------|
| Jacob Maegli 6317153 Printed name                    |               |                                     |
| Eric Pratt Law Firm P.C.                             |               |                                     |
| 5301 E. State St, Ste 116<br>Rockford, IL 61108      |               |                                     |
| Number, Street, City, State & ZIP Code               |               |                                     |
| Contact phone  | Email address |                                     |
| 6317153  |               |                                     |
| Bar number & State                                   |               |                                     |

|                          | Docum                          | IIL LAUC O OLJ <del>4</del>  |  |
|--------------------------|--------------------------------|--|--|
| mation to identify your  | case:                          |  |  |
| Delbert A Scott, II      |                                |  |  |
| First Name               | Middle Name                    | Last Name  |  |
|                          |                                |  |  |
| First Name               | Middle Name                    | Last Name  |  |
| ankruptcy Court for the: | NORTHERN DISTRICT              | OF ILLINOIS  |  |
|                          |                                |  |  |
|                          | Delbert A Scott, II First Name | Delbert A Scott, II First Name Middle Name  First Name Middle Name | Delbert A Scott, II First Name Middle Name Last Name  First Name Middle Name Last Name |

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a      | assets<br>of what you own |
|-----|--|-------------|---------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 46,000.00                 |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 37,500.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 83,500.00                 |
| Par | t 2: Summarize Your Liabilities  |             |                           |
|     |  |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 54,851.00                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 84,938.00                 |
|     | Your total liabilities   | \$          | 139,789.00                |
| Par | t 3: Summarize Your Income and Expenses  |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 2,337.00                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 1,379.00                  |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sc | hedules.                  |
|     | ■ Yes What kind of debt do you have?   |             |                           |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Delbert A Scott, II

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

3,065.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total clai | im   |
|--|------------|------|
| From Part 4 on Schedule E/F, copy the following:   |            |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$         | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$         | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$         | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$         | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$         | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$        | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$         | 0.00 |

|           | Cas   | se 17-8269  | 1 Doc 1               |             | 11/13/17<br>ument                                 | Entered 11/13/2<br>Page 10 of 54  | L7 09:55  | :09 De:          | sc Ma    | ain                                   |
|-----------|---|---|-----------------------|-------------|---|---|---|------------------|----------|---------------------------------------|
| Fill      | in this inform  | ation to identify                                     | your case and th      | nis filing  | :   |   |   |                  |          |                                       |
| Deb       | otor 1  | Delbert A Sc  | ott, II               |             |   |   |   |                  |          |                                       |
|           | _   | First Name  | Middle                | e Name      |   | Last Name   |   |                  |          |                                       |
|           | otor 2<br>use, if filing)   | First Name  | Middle                | e Name      |   | Last Name   |   |                  |          |                                       |
| Unit      | ed States Ban   | kruptcy Court for                                     | r the: NORTHER        | RN DISTF    | RICT OF ILLIN                                     | IOIS  |   |                  |          |                                       |
| Cas       | e number  |   |                       |             |   | -   |   |                  | -        | neck if this is an<br>nended filing   |
|           |   | m 106A/E<br><b>A/B: P</b>                             | _                     |             |   |   |   |                  |          | 12/15                                 |
| Part . Do | Describe E  | ion.<br>ach Residence, B<br>ave any legal or ed<br>2. | Building, Land, or Ot | ther Real I | Estate You Ow                                     | e top of any additional pages  n or Have an Interest In  land, or similar property? | ,,  |                  |          |                                       |
| 1.1       |   |   |                       | What i      | is the property                                   | ? Check all that apply  |   |                  |          |                                       |
|           | 510 Whittemore Dr  Street address, if available, or other description |   |                       |             | Single-family h<br>Duplex or multi<br>Condominium | i-unit building   | educt secured claims or exemptions. Put<br>int of any secured claims on <i>Schedule D:</i><br>with Who Have Claims Secured by Property. |                  |          |                                       |
|           | South Beloi   | t IL  | 61080-0000            |             | Manufactured of Land                              | or mobile home  | Current va  |                  |          | nt value of the                       |
|           | City  | State   | ZIP Code              |             | Investment pro                                    | pperty  |   | 46,000.00        | portio   | \$46,000.00                           |
|           |   |   |                       |             | Timeshare Other                                   |   | (such as fe   | ee simple, tena  |          | ership interest<br>the entireties, or |
|           |   |   |                       | Who h       |   | in the property? Check one  |   | e), if known.    |          |                                       |
|           | Winnebago   |   |                       |             | Debtor 1 only                                     |   | Fee simp  | NC .             |          |                                       |
|           | County  |   |                       |             | Debtor 2 only  Debtor 1 and D                     | Ophtor 2 ophy   |   |                  |          |                                       |
|           |   |   |                       |             |   | Debtor 2 only the debtors and another   |   | c if this is com | munity p | property                              |
|           |   |   |                       |             |   | ou wish to add about this ite   | ,   | ,                |          |                                       |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$46,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

property identification number: per current apprasal

Official Form 106A/B Schedule A/B: Property page 1

Case 17-82691

Doc 1

Filed 11/13/17

Entered 11/13/17 09:55:09

Desc Main

| Debtor 1                            | Delbert A Sco   | O# II   | Document F                      | Page 12 of $54_{\text{Case}}$   | number (if known)      |   |
|-------------------------------------|---|---|---------------------------------|---------------------------------|------------------------|---|
|                                     | -   | оц, п   |                                 |                                 | - Transcer (ii known)  |   |
|                                     | Describe  |   |                                 |                                 |                        |   |
| <ol> <li>Clothe<br/>Exam</li> </ol> |   | othes, furs, leather coats, des                           | signer wear, shoes, a           | ccessories                      |                        |   |
| □ No                                |   |   |                                 |                                 |                        |   |
| Yes.                                | Describe  |   |                                 |                                 |                        |   |
|                                     |   | Necessary wearing appa                                    | arel                            |                                 |                        | \$200.00                                    |
| □ No                                |   | welry, costume jewelry, enga                              | gement rings, weddir            | ng rings, heirloom jewelry      | , watches, gems, go    | ld, silver                                  |
|                                     |   | Various Costume Jewel                                     | ry                              |                                 |                        | \$100.00                                    |
| Exam  No □ Yes.  4. Any of ■ No     | arm animals ples: Dogs, cats, Describe ther personal an | d household items you did                                 | not already list, inc           | luding any health aids <b>ງ</b> | you did not list       |   |
|                                     |   | of all of your entries from P<br>number here              |                                 |                                 | nave attached          | \$2,000.00                                  |
|                                     | escribe Your Finan<br>wn or have any l                  | cial Assets<br>egal or equitable interest in              | any of the following            | g?                              |                        | Current value of the portion you own?       |
|                                     |   |   |                                 |                                 |                        | Do not deduct secured claims or exemptions. |
| ■ No                                |   | have in your wallet, in your ho                           |                                 |                                 | you file your petition | n   |
|                                     |   | avings, or other financial acco                           |                                 |                                 | ınions, brokerage ho   | ouses, and other similar                    |
| □ No                                | institutions.   | If you have multiple accounts                             | s with the same institution nar |                                 |                        |   |
| ■ res.                              |   |   |                                 |                                 |                        |   |
|                                     |   | 17.1. Checking  | Chase Bank                      | (                               |                        | \$200.00                                    |
|                                     |   | 17.2. Savings   | Chase Bank                      | ,                               |                        | \$300.00                                    |
|                                     |   | 17.2. Savings   | Chase Bank                      |                                 |                        |   |
|                                     |   | or publicly traded stocks<br>investment accounts with bro | okerage firms, money            | y market accounts               |                        |   |
| ■ No<br>□ Yes.                      |   | Institution or issuer                                     | name:                           |                                 |                        |   |
| joint                               | ublicly traded st<br>venture                            | ock and interests in incorp                               | orated and unincorp             | porated businesses, inc         | cluding an interest    | in an LLC, partnership, and                 |
| ■ No                                | Give specific inf                                       | ormation about them                                       |                                 |                                 |                        |   |
| Tes.<br>Official For                | •   | omation about the III                                     | <br>Schedule A/B: Pro           | pperty                          |                        | page 3                                      |

Entered 11/13/17 09:55:09 Case 17-82691 Doc 1 Filed 11/13/17 Desc Main Document Page 13 of 54 Case number (if known) Debtor 1 Delbert A Scott, II Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

### 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information...

|                    |   | Doc 1                        | Filed 11/13/17<br>Document | Page 14 of 54   | Desc Main                  |
|--------------------|---|------------------------------|----------------------------|---|----------------------------|
| Debtor 1           | Delbert A Scott, II   |                              |                            | Case number (if known)                                  |                            |
|                    | ests in insurance policies<br>apples: Health, disability, or life                   | e insurance; h               | ealth savings account (l   | HSA); credit, homeowner's, or renter's insurar          | nce                        |
| ☐ Yes              | . Name the insurance compa<br>Com   | any of each po<br>pany name: | olicy and list its value.  | Beneficiary:  | Surrender or refund value: |
| If you             | nterest in property that is d<br>a are the beneficiary of a livin<br>cone has died. |                              |                            | ed<br>surance policy, or are currently entitled to rece | eive property because      |
|                    | . Give specific information   |                              |                            |   |                            |
| Exan<br>■ No       | as against third parties, who apples: Accidents, employments. Describe each claim   |                              |                            | it or made a demand for payment<br>to sue               |                            |
| 34. Other          | contingent and unliquidate  | ed claims of                 | every nature, including    | g counterclaims of the debtor and rights to             | set off claims             |
| ■ No<br>□ Yes      | s. Describe each claim  |                              |                            |   |                            |
| ■ No               | inancial assets you did not   | already list                 |                            |   |                            |
| ☐ Yes              | s. Give specific information  |                              |                            |   |                            |
|                    | the dollar value of all of yo<br>Part 4. Write that number he                       |                              |                            | ny entries for pages you have attached                  | \$500.00                   |
| Part 5: D          | escribe Any Business-Related  | Property You                 | Own or Have an Interest I  | n. List any real estate in Part 1.                      |                            |
| 37. <b>Do yo</b> u | ı own or have any legal or equi   | table interest i             | n any business-related p   | roperty?  |                            |
| _                  | Go to Part 6.   |                              |                            |   |                            |
| ☐ Yes.             | Go to line 38.  |                              |                            |   |                            |
|                    | escribe Any Farm- and Comme<br>you own or have an interest in fa                    |                              |                            | n or Have an Interest In.                               |                            |
|                    | ou own or have any legal or o. Go to Part 7.  | equitable in                 | terest in any farm- or o   | commercial fishing-related property?                    |                            |
| ☐ Ye               | es. Go to line 47.  |                              |                            |   |                            |
| Part 7:            | Describe All Property You   | Own or Have a                | n Interest in That You Did | Not List Above  |                            |
| Exan               | ou have other property of an analysis. Season tickets, country                      |                              |                            |   |                            |
| ■ No<br>□ Yes      | Give specific information   |                              |                            |   |                            |

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

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Case number (if known) Document

Debtor 1 Delbert A Scott, II

| Part | List the Totals of Each Part of this Form                    |             |                              |             |
|------|--|-------------|------------------------------|-------------|
| 55.  | Part 1: Total real estate, line 2                            |             |                              | \$46,000.00 |
| 56.  | Part 2: Total vehicles, line 5                               | \$35,000.00 |                              | _           |
| 57.  | Part 3: Total personal and household items, line 15          | \$2,000.00  |                              |             |
| 58.  | Part 4: Total financial assets, line 36                      | \$500.00    |                              |             |
| 59.  | Part 5: Total business-related property, line 45             | \$0.00      |                              |             |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    | \$0.00      |                              |             |
| 61.  | Part 7: Total other property not listed, line 54 +           | \$0.00      |                              |             |
| 62.  | Total personal property. Add lines 56 through 61             | \$37,500.00 | Copy personal property total | \$37,500.00 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |             |                              | \$83,500.00 |

Official Form 106A/B Schedule A/B: Property page 6

|                     |                          | Docume            | <u> 1 aac 10 01 57</u> |  |
|---------------------|--------------------------|-------------------|------------------------|--|
| Fill in this infor  | mation to identify your  | case:             |                        |  |
| Debtor 1            | Delbert A Scott, II      |                   |                        |  |
|                     | First Name               | Middle Name       | Last Name              |  |
| Debtor 2            |                          |                   |                        |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name              |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS            |  |
| Case number         |                          |                   |                        |  |
| (if known)          |                          |                   |                        |  |
|                     |                          |                   |                        |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property                             | Current value of the portion you own  Copy the value from Schedule A/B | Amount of the exemption you claim  Specific laws that allow exemption  Check only one box for each exemption. |
|--|--|---|
| 510 Whittemore Dr South Beloit, IL 61080 Winnebago County per current apprasal Line from <i>Schedule A/B</i> : 1.1 | \$46,000.00  | \$15,000.00 735 ILCS 5/12-901  100% of fair market value, up to any applicable statutory limit                |
| 2017 Ford Escape 10000 miles<br>Line from <i>Schedule A/B</i> : 3.1  | \$35,000.00  | \$62.00 T35 ILCS 5/12-1001(c)  100% of fair market value, up to any applicable statutory limit                |
| Older Household furniture & personal belongings Line from <i>Schedule A/B</i> : 6.1                                | \$1,500.00   | \$1,500.00 735 ILCS 5/12-1001(b)  100% of fair market value, up to any applicable statutory limit             |
| Tv, Computers, Cell phones, and other electronic devices Line from <i>Schedule A/B</i> : 7.1                       | \$200.00   | \$200.00 T35 ILCS 5/12-1001(b)  100% of fair market value, up to any applicable statutory limit               |
| Various Costume Jewelry<br>Line from <i>Schedule A/B</i> : 12.1  | \$100.00   | \$100.00 735 ILCS 5/12-1001(b)  100% of fair market value, up to any applicable statutory limit               |

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| Debtor | 1 Delbert A Scott, II   | Document                             |          | Case number (if known)  |                                    |
|--------|---|--------------------------------------|----------|---|------------------------------------|
|        | ief description of the property and line on hedule A/B that lists this property   | Current value of the portion you own | Amo      | ount of the exemption you claim                                 | Specific laws that allow exemption |
|        |   | Copy the value from<br>Schedule A/B  | Che      | ck only one box for each exemption.                             |                                    |
|        | necking: Chase Bank<br>ne from <i>Schedule A/B</i> : 17.1   | \$200.00                             |          | \$200.00  | 735 ILCS 5/12-1001(b)              |
| LII    | ic from deficuate AVB. 17.1   |                                      |          | 100% of fair market value, up to any applicable statutory limit |                                    |
|        | avings: Chase Bank  | \$300.00                             |          | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Lii    | io iidiii Gonedale 7VB. TT.E  |                                      |          | 100% of fair market value, up to any applicable statutory limit |                                    |
|        | re you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No  Yes. Did you acquire the property cover  No Yes | 3 years after that for ca            | ases fil | ,   | ,                                  |

|   |                        | <u> Document</u>  | Page 18 c        | of 54                                  |                          |                   |
|---|------------------------|---|------------------|--|--------------------------|-------------------|
| Fill in this information                  | n to identify you      | r case:   |                  |  |                          |                   |
| Debtor 1                                  | Aclbort A Coott I      | 1   |                  |  |                          |                   |
|   | Pelbert A Scott, I     |   | _ast Name        |  |                          |                   |
| Debtor 2                                  |                        |   |                  |  |                          |                   |
|   | rst Name               | Middle Name L   | _ast Name        |  | -                        |                   |
|   |                        |   |                  |  |                          |                   |
| United States Bankrup                     | otcy Court for the:    | NORTHERN DISTRICT OF ILLIN  | OIS              |  |                          |                   |
| Casa numbar                               |                        |   |                  |  |                          |                   |
| Case number                               |                        |   |                  |  | ☐ Chec                   | k if this is an   |
| ,   |                        |   |                  |  |                          | ided filing       |
|   |                        |   |                  |  | amer                     | aca ming          |
| Official Form 10                          | 16D                    |   |                  |  |                          |                   |
|   |                        |   |                  |  |                          |                   |
| Schedule D:                               | Creditors              | Who Have Claims Se  | <u>ecured</u>    | by Propert                             | У                        | 12/15             |
|   |                        | If two married people are filing together,<br>out, number the entries, and attach it to t |                  |  |                          |                   |
| . Do any creditors have                   | claims secured by      | your property?  |                  |  |                          |                   |
| ☐ No. Check this                          | box and submit th      | nis form to the court with your other sc  | hedules. You     | have nothing else t                    | o report on this form.   |                   |
| _   |                        | •   |                  | J                                      |                          |                   |
| ■ Yes. Fill in all o                      | of the information i   | Delow.  |                  |  |                          |                   |
| Part 1: List All Sec                      | cured Claims           |   |                  |  |                          |                   |
| 2. List all secured claim                 | s. If a creditor has r | nore than one secured claim, list the creditor  | or separately    | Column A                               | Column B                 | Column C          |
|   |                        | a particular claim, list the other creditors in   | Part 2. As       | Amount of claim                        | Value of collateral      | Unsecured         |
| much as possible, list the                | ciaims in aipnabetion  | cal order according to the creditor's name.   |                  | Do not deduct the value of collateral. | that supports this claim | portion<br>If any |
| 2.1 Advia Credit U                        | nion                   | Describe the property that secures the  | claim:           | \$34,938.00                            | \$35,000.00              | \$0.00            |
| Creditor's Name                           |                        | 2017 Ford Escape 10000 miles  |                  | ,                                      |                          |                   |
|   |                        | Zorri ora Zosapo rocco nimes  |                  |  |                          |                   |
|   |                        |   |                  |  |                          |                   |
| 550 S Rivervie                            | w Dr                   | As of the date you file, the claim is: Che apply.   | eck all that     |  |                          |                   |
| Parchment, MI                             | 49004                  | ☐ Contingent  |                  |  |                          |                   |
| Number, Street, City,                     | State & Zip Code       | ☐ Unliquidated  |                  |  |                          |                   |
| 7,  | ,                      | ☐ Disputed  |                  |  |                          |                   |
| Who owes the debt?                        | Check one.             | Nature of lien. Check all that apply.   |                  |  |                          |                   |
| ■ Debtor 1 only                           |                        | ■ An agreement you made (such as mo   | rtagas or aggur  | od                                     |                          |                   |
| Debtor 2 only                             |                        | car loan)   | rigage or secure | eu                                     |                          |                   |
|   | 0                      | _   |                  |  |                          |                   |
| Debtor 1 and Debtor 2                     | •                      | ☐ Statutory lien (such as tax lien, mecha   | inic's lien)     |  |                          |                   |
| At least one of the de                    |                        | ☐ Judgment lien from a lawsuit  |                  |  |                          |                   |
| ☐ Check if this claim r<br>community debt | elates to a            | Other (including a right to offset)   |                  |  |                          |                   |
| community debt                            |                        |   |                  |  |                          |                   |
|   | Opened                 |   |                  |  |                          |                   |
|   | 1/09/17 Last           |   |                  |  |                          |                   |
|   | Active                 |   |                  |  |                          |                   |
| Date debt was incurred                    | 9/28/17                | Last 4 digits of account number   | r 0001           |  |                          |                   |
|   |                        |   |                  |  |                          |                   |
| 2.2 Chase Mtg                             |                        | Describe the property that secures the  | claim:           | \$19,913.00                            | \$46,000.00              | \$0.00            |
| Creditor's Name                           |                        | 510 Whittemore Dr South Beloit,   | . IL             | · ,                                    |                          | · ·               |
|   |                        | 61080 Winnebago County  | ´                |  |                          |                   |
|   |                        | per current apprasal  |                  |  |                          |                   |
| Po Box 24696                              |                        | As of the date you file, the claim is: Che  | eck all that     |  |                          |                   |
| Columbus, OH                              | 1 43224                | apply.  |                  |  |                          |                   |
|   |                        | Contingent  |                  |  |                          |                   |
| Number, Street, City,                     | olale & ZIP CODE       | Unliquidated  |                  |  |                          |                   |
| Who owes the debt? (                      | Chook one              | Disputed  |                  |  |                          |                   |
| _   | эпеск опе.             | Nature of lien. Check all that apply.   |                  |  |                          |                   |
| Debtor 1 only                             |                        | An agreement you made (such as mo   | rtgage or secur  | ed                                     |                          |                   |
| Debtor 2 only                             |                        | car loan)   |                  |  |                          |                   |
| Debtor 1 and Debtor 2                     | •                      | ☐ Statutory lien (such as tax lien, mecha   | anic's lien)     |  |                          |                   |
| ☐ At least one of the de                  | btors and another      | ☐ Judgment lien from a lawsuit  |                  |  |                          |                   |

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| Debtor 1 Delbert A S     | Scott, II                                 |   | Cas  | e number (if know)         |   |
|--------------------------|---|---|------|----------------------------|---|
| First Name               | Middle Na                                 | me Last Name  |      | _                          |   |
| ☐ Check if this claim re | elates to a                               | Other (including a right to offset)   |      |                            |   |
| Date debt was incurred   | Opened<br>03/06 Last<br>Active<br>9/15/17 | Last 4 digits of account number   | 7479 |                            |   |
|                          | of your form, add t                       | olumn A on this page. Write that number h<br>he dollar value totals from all pages. | ere: | \$54,851.00<br>\$54,851.00 | 1 |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Document Page 20 of 54 Fill in this information to identify your case: Debtor 1 Delbert A Scott, II Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Bank Of America Last 4 digits of account number 7066 \$9,811.00 Nonpriority Creditor's Name Nc4-105-03-14 Opened 05/11 Last Active Po Box 26012 When was the debt incurred? 9/29/17 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify Credit Card

Page 21 of 54 Document Debtor 1 Delbert A Scott, II Case number (if know) 4.2 Capital One Last 4 digits of account number 0172 \$5.392.00 Nonpriority Creditor's Name Opened 02/17 Last Active 15000 Capital One Dr When was the debt incurred? 9/29/17 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 Chase Card Last 4 digits of account number \$9.366.00 8875 Nonpriority Creditor's Name Opened 03/06 Last Active Attn: Correspondence Dept Po Box 15298 When was the debt incurred? 9/28/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.4 Chase Card Last 4 digits of account number 4069 \$440.00 Nonpriority Creditor's Name Opened 11/73 Last Active Po Box 15298 When was the debt incurred? 9/27/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Document Page 22 of 54 Debtor 1 Delbert A Scott, II Case number (if know) 4.5 Citibank / Sears Last 4 digits of account number 1794 \$14.851.00 Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Opened 07/00 Last Active Po Box 790040 When was the debt incurred? 9/16/17 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.6 Citibank/The Home Depot Last 4 digits of account number 2738 \$169.00 Nonpriority Creditor's Name Opened 06/17 Last Active Citicorp Cr Srvs/Centralized Bankruptcy When was the debt incurred? 9/29/17 Po Box 790040 St Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.7 Citicards Cbna \$7,279.00 Last 4 digits of account number 9605 Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 07/15 Last Active Bankrupt When was the debt incurred? 8/31/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Credit Card

report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Delbert A Scott, II Case number (if know) 4.8 Comenity Bank/eldrbrmn Last 4 digits of account number 8672 \$0.00 Nonpriority Creditor's Name Opened 11/03 Last Active Po Box 182125 When was the debt incurred? 4/29/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.9 Discover Financial \$16,367.00 Last 4 digits of account number 6077 Nonpriority Creditor's Name Opened 07/94 Last Active Po Box 3025 When was the debt incurred? 10/12/17 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Elan Financial Service 7730 \$8,939.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/11 Last Active Po Box 108 When was the debt incurred? 9/29/17 Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Delbert A Scott, II Case number (if know) 4.1 \$301.00 Kohls/Capital One 1202 Last 4 digits of account number Nonpriority Creditor's Name Kohls Credit Opened 10/10 Last Active Po Box 3043 When was the debt incurred? 9/29/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 OneMain Financial \$6,800.00 5642 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 06/17 Last Active Attn: Bankruptcy Department When was the debt incurred? 9/15/17 601 Nw 2nd St #300 Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Note Loan ☐ Yes 4.1 Syncb/citgo 6676 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 965060 When was the debt incurred? Opened 10/17 Last Active 10/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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| Jepto | Delbert A Scott, II   |  | Case number (if know)                         |        |
|-------|---|--|---|--------|
| .1    | Syncb/PLCC  | Last 4 digits of account number                              | 5139  | \$0.00 |
|       | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060                              | When was the debt incurred?                                  | Opened 08/17 Last Active 10/17                |        |
|       | Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that apply                      |        |
|       | Debtor 1 only   | ☐ Contingent   |   |        |
|       | Debtor 2 only   | ☐ Unliquidated   |   |        |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |        |
|       | $\square$ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured                                | d claim:                                      |        |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |        |
|       | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not  |        |
|       | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |        |
|       | Yes   | Other. Specify Charge Acc                                    | ount  |        |
| .1    | Synchrony Bank/ JC Penneys  Nonpriority Creditor's Name                                 | Last 4 digits of account number                              | 1528  | \$0.00 |
|       | Attn: Bankruptcy<br>Po Box 965060   | When was the debt incurred?                                  | Opened 05/10 Last Active 1/07/14              |        |
|       | Orlando, FL 32896  Number Street City State Zlp Code                                    | As of the date you file, the claim                           | is: Check all that apply                      |        |
|       | Who incurred the debt? Check one.   | 7.5 or and date <b>y</b> ou me, and claim.                   | er chook all that apply                       |        |
|       | Debtor 1 only   | ☐ Contingent   |   |        |
|       | Debtor 2 only   | ☐ Unliquidated   |   |        |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |        |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:                                      |        |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |        |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |        |
|       | ■ No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |        |
|       | Yes   | ■ Other. Specify Charge Acc                                  | ount  |        |
| .1    | Synchrony Bank/Care Credit  | Last 4 digits of account number                              | 6618  | \$0.00 |
|       | Nonpriority Creditor's Name<br>Attn: Bankruptcy<br>Po Box 965060<br>Orlando, FL 32896   | When was the debt incurred?                                  | Opened 04/13 Last Active 3/18/14              |        |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                    | As of the date you file, the claim                           | is: Check all that apply                      |        |
|       | ■ Debtor 1 only   | ☐ Contingent   |   |        |
|       | Debtor 2 only   | ☐ Unliquidated   |   |        |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |        |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | d claim:                                      |        |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |        |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |        |
|       | No  | Debts to pension or profit-sharing                           | g plans, and other similar debts              |        |
|       | ☐ Yes   | ■ Other. Specify Charge Acc                                  | ount  |        |
|       |   |  |   |        |

|          | Case 11-02091       | DOC T | LIIEU TT/T2/T/ | Ellfelen 11/19/11 03:22:03          | Desc Mail |
|----------|---------------------|-------|----------------|-------------------------------------|-----------|
| Debtor 1 | Delbert A Scott, II |       | Document       | Page 26 of 54 Case number (if know) |           |
|          |                     |       |                |                                     |           |

| Synchrony Bank/Walmart                    | Last 4 digits of account number      | 7489   | \$5,223.0 |
|---|--------------------------------------|--|-----------|
| Nonpriority Creditor's Name               | _                                    |  |           |
| Attn: Bankruptcy                          |                                      | Opened 04/16 Last Active                     |           |
| Po Box 965060                             | When was the debt incurred?          | 10/12/17                                     |           |
| Orlando, FL 32896                         |                                      |  |           |
| Number Street City State Zlp Code         | As of the date you file, the claim i | s: Check all that apply                      |           |
| Who incurred the debt? Check one.         |                                      |  |           |
| Debtor 1 only                             | ☐ Contingent                         |  |           |
| Debtor 2 only                             | ☐ Unliquidated                       |  |           |
| Debtor 1 and Debtor 2 only                | ☐ Disputed                           |  |           |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured        | d claim:                                     |           |
| ☐ Check if this claim is for a community  | ☐ Student loans                      |  |           |
| debt                                      | ☐ Obligations arising out of a sepa  | ration agreement or divorce that you did not |           |
| Is the claim subject to offset?           | report as priority claims            |  |           |
| ■ No                                      | Debts to pension or profit-sharing   | g plans, and other similar debts             |           |
| □Yes                                      | ■ Other. Specify Credit Card         |  |           |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | 7  | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total                 |     |   |     | -  |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|                       | 6f. | Student loans   | 6f. |    | Total Claim |
| Total                 | Ю.  | Student loans   | ы.  | \$ | 0.00        |
| claims                | 0   | Obligations original and of a consential account of the discount for                                    |     |    |             |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 84,938.00   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 84,938.00   |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Document Page 27 of 54 Fill in this information to identify your case: Debtor 1 Delbert A Scott, II Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the , Street, City, State and ZIF | e contract or lease<br>Code | State what the contract or lease is for |
|-----|-----------|------------------------------|---|-----------------------------|---|
| 2.1 |           |                              |   |                             |   |
|     | Name      |                              |   |                             |   |
|     | Number    | Street                       |   |                             |   |
|     | City      |                              | State   | ZIP Code                    | <u> </u>                                |
| 2.2 |           |                              |   |                             |   |
|     | Name      |                              |   |                             |   |
|     | Number    | Street                       |   |                             |   |
|     | City      |                              | State   | ZIP Code                    | _                                       |
| 2.3 |           |                              |   |                             |   |
|     | Name      |                              |   |                             |   |
|     | Number    | Street                       |   |                             | _                                       |
|     | City      |                              | State   | ZIP Code                    | _                                       |
| 2.4 |           |                              |   |                             |   |
|     | Name      |                              |   |                             |   |
|     | Number    | Street                       |   |                             | _                                       |
|     | City      |                              | State   | ZIP Code                    | _                                       |
| 2.5 |           |                              |   |                             |   |
|     | Name      |                              |   |                             |   |
|     | Number    | Street                       |   |                             | <u> </u>                                |
|     | City      |                              | State   | ZIP Code                    | _                                       |

|                                |  | Docume  | ent Page 28 o                | <u>f 54</u>   |        |
|--------------------------------|--|---|------------------------------|---|--------|
| Fill in this                   | information to identify your o                                       | ase:  |                              |   |        |
| Debtor 1                       | Delbert A Scott, II  |   |                              |   |        |
|                                | First Name   | Middle Name                                       | Last Name                    |   |        |
| Debtor 2<br>(Spouse if, filing | ng) First Name   | Middle Name                                       | Last Name                    |   |        |
|                                |  |   |                              |   |        |
| United Sta                     | tes Bankruptcy Court for the:  | NORTHERN DISTRICT                                 | OF ILLINOIS                  |   |        |
| Case num                       | ber  |   |                              |   |        |
| (if known)                     |  |   |                              | ☐ Check if this is an   |        |
|                                |  |   |                              | amended filing  |        |
| Officia                        | l Form 106H  |   |                              |   |        |
|                                |  | htore   |                              | 40/   | 4 -    |
| Sched                          | lule H: Your Code  | entor 2   |                              | 12/1  | 15     |
| ill it out, a<br>our name      |  | ooxes on the left. Attac<br>Answer every question | h the Additional Page to<br> | ion. If more space is needed, copy the Additional Pactor this page. On the top of any Additional Pages, writes as a codebtor.                                     |        |
| <b>=</b>                       |  |   |                              |   |        |
| ■ No                           |  |   |                              |   |        |
| ☐ Yes                          | 5  |   |                              |   |        |
|                                | hin the last 8 years, have you a, California, Idaho, Louisiana,      |   |                              | y? (Community property states and territories include ngton, and Wisconsin.)  |        |
| ■ No.                          | Go to line 3.  |   |                              |   |        |
| ☐ Yes                          | s. Did your spouse, former spou                                      | se, or legal equivalent liv                       | e with you at the time?      |   |        |
|                                |  |   |                              |   |        |
| in line<br>Form                | 2 again as a codebtor only if  | that person is a guarar                           | ntor or cosigner. Make s     | if your spouse is filing with you. List the person sh<br>sure you have listed the creditor on Schedule D (Off<br>6G). Use Schedule D, Schedule E/F, or Schedule G | ficial |
|                                | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZIF | <sup>o</sup> Code                                 |                              | Column 2: The creditor to whom you owe the do Check all schedules that apply:   | ebt    |
| 3.1                            |  |   |                              | ☐ Schedule D, line  |        |
|                                | Name   |   |                              | ☐ Schedule E/F, line  |        |
|                                |  |   |                              | ☐ Schedule G, line  |        |
| -                              | Number Street  |   |                              | _   |        |
|                                | City   | State   | ZIP Code                     |   |        |
|                                |  |   |                              | Ostatu P. Ka  |        |
| 3.2                            | Name   |   |                              | Schodule D, line  |        |
|                                |  |   |                              | ☐ Schedule E/F, line  |        |
| =                              | North are  |   |                              |   |        |
|                                | Number Street  |   |                              |   |        |

State

City

ZIP Code

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| Eill           | in this information to identify your  | 0000:  |   |                           |                                       |  |  |                               |                                      |
|----------------|---|--|---|---------------------------|---------------------------------------|--|--|-------------------------------|--------------------------------------|
|                | otor 1 Delbert A S  |  |   |                           |                                       |  |  |                               |                                      |
|                | btor 2  buse, if filing)  |  |   |                           |                                       |  |  |                               |                                      |
| Uni            | ted States Bankruptcy Court for the   | ne: NORTHERN DISTRI  | CT OF ILLINOIS                                      |                           |                                       |  |  |                               |                                      |
| O Be a sup spo | fficial Form 1061  chedule I: Your Incase complete and accurate as populying correct information. If your line is seen as separated and your separated to this form | ssible. If two married pec<br>u are married and not fili<br>our spouse is not filing w | ng jointly, and your sith you, do not include       | spouse is l<br>de informa | A A A A A A A A A A A A A A A A A A A | 3 income :  MM / DD/ Y  otor 2), bo you, inclut your spo | ed filing ent showing as of the for TYYY  th are equal to the form ouse. If mo | nation about<br>re space is r | 12/15<br>ible for<br>your<br>needed, |
|                | t 1: Describe Employmen   |  | eriai pages, write ye                               | - Hame an                 | ia dasc iii                           |  |  | ioner every                   | question                             |
| 1.             | Fill in your employment information.  |  | Debtor 1  |                           |                                       | Debtor 2   | or non-fil   | ing spouse                    |                                      |
|                | If you have more than one job, attach a separate page with information about additional   | Employment status  | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |                           |                                       | ☐ Emplo  | •  |                               |                                      |
|                | employers.  | Occupation   | temp  |                           |                                       |  |  |                               |                                      |
|                | Include part-time, seasonal, or self-employed work.   | Employer's name  | Manpower  |                           |                                       |  |  |                               |                                      |
|                | Occupation may include studen or homemaker, if it applies.  | Employer's address   |   |                           |                                       |  |  |                               |                                      |
|                |   | How long employed t  | here? 1 month                                       | 1                         |                                       |  |  |                               |                                      |
| Par            | Give Details About M  | onthly Income  |   |                           |                                       |  |  |                               |                                      |
|                | mate monthly income as of the use unless you are separated.   | date you file this form. If  | you have nothing to re                              | eport for any             | y line, write                         | e \$0 in the   | space. Incl  | lude your non                 | n-filing                             |
|                | u or your non-filing spouse have e space, attach a separate sheet   |  | ombine the information                              | n for all emp             | oloyers for                           | that perso   | n on the lin   | ies below. If y               | ou need                              |
|                |   |  |   |                           | For De                                | btor 1   | For Deb  | otor 2 or<br>ng spouse        |                                      |
| 2.             | List monthly gross wages, sa deductions). If not paid monthly   |  |   | 2.                        | \$3                                   | ,065.00  | \$   | N/A                           |                                      |
| 3.             | Estimate and list monthly over  | rtime pay.   |   | 3. +                      | \$                                    | 0.00   | +\$  | N/A                           |                                      |
| 4.             | Calculate gross Income. Add   | line 2 + line 3.   |   | 4.                        | \$ 3.0                                | 65.00  | \$   | N/A                           |                                      |

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| Deb | tor 1         | Delbert A Scott, II   | _    | C  | Case     | number (if known) |      |                   |                     |  |
|-----|---------------|---|------|----|----------|-------------------|------|-------------------|---------------------|--|
|     |               |   |      |    | Foi      | r Debtor 1        | _    | or Debtor         |                     |  |
|     | Сор           | y line 4 here   | 4.   |    | \$       | 3,065.00          | \$   |                   | N/A                 | <u> </u>                                     |
| 5.  | List          | all payroll deductions:   |      |    |          |                   |      |                   |                     |  |
|     | 5a.           | Tax, Medicare, and Social Security deductions   | 5a   | ı. | \$       | 728.00            | \$   |                   | N/A                 |  |
|     | 5b.           | Mandatory contributions for retirement plans  | 5b   |    | \$       | 0.00              | \$   |                   | N/A                 | _  |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c   |    | \$       | 0.00              | \$   |                   | N/A                 |  |
|     | 5d.           | Required repayments of retirement fund loans  | 5d   |    | \$       | 0.00              | \$   |                   | N/A                 | _  |
|     | 5e.           | Insurance   | 5e   | ٠. | \$       | 0.00              | \$   |                   | N/A                 | _  |
|     | 5f.           | Domestic support obligations  | 5f.  |    | \$       | 0.00              | \$   |                   | N/A                 | _  |
|     | 5g.           | Union dues  | 5g   |    | \$       | 0.00              | \$   |                   | N/A                 | <br>\  |
|     | 5h.           | Other deductions. Specify:  | 5h   | .+ | \$_      | 0.00              | + \$ |                   | N/A                 | _  |
| 6.  | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.   |    | \$       | 728.00            | \$   |                   | N/A                 |  |
| 7.  | Cald          | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.   |    | \$       | 2,337.00          | \$   |                   | N/A                 | <u> </u>                                     |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |      |    |          |                   |      |                   |                     |  |
|     |               | monthly net income.   | 8a   | ١. | \$_      | 0.00              | \$   |                   | N/A                 |  |
|     | 8b.           | Interest and dividends  | 8b   |    | \$_      | 0.00              | \$   |                   | N/A                 | <u>.                                    </u> |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c   |    | \$_      | 0.00              | \$   |                   | N/A                 |  |
|     | 8d.           | Unemployment compensation   | 8d   |    | \$_      | 0.00              | \$   |                   | N/A                 | _  |
|     | 8e.           | Social Security   | 8e   |    | \$_      | 0.00              | \$   |                   | N/A                 | <u>.                                    </u> |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | 8f.  |    | \$_      | 0.00              | \$   |                   | N/A                 | _  |
|     | 8g.           | Pension or retirement income  | 8g   |    | \$_      | 0.00              | \$   |                   | N/A                 | _  |
|     | 8h.           | Other monthly income. Specify:  | 8h   | .+ | \$_      | 0.00              | + \$ |                   | N/A                 | <u>\</u>                                     |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.   | 9  | <u> </u> | 0.00              | \$   |                   | N/                  | A  |
| 10  | Cale          | culate monthly income. Add line 7 + line 9.   | 10.  | \$ |          | 2,337.00 + \$     |      | N/A               | = \$                | 2,337.00                                     |
| 10. |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.  | Ψ_ |          | Σ,337.00 + ψ_     |      | IN/A              | ]                   | 2,337.00                                     |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:     | depe |    |          | •                 |      | n <i>Schedule</i> | e <i>J</i> .<br>+\$ | 0.00   |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailes   |      |    |          |                   |      |                   | \$                  | 2,337.00                                     |
| 40  | D -           |   |      |    |          |                   |      |                   | Combi<br>month      | nea<br>ly income                             |
| 13. | Do i          | /ou expect an increase or decrease within the year after you file this form<br>No.  | 17   |    |          |                   |      |                   |                     |  |
|     | _             | Yes Fynlain:  |      |    |          |                   |      |                   |                     |  |

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| Fill.ii    | n this informa          | ation to identify yo                                 | our case:        |   |                       |                  |                |                |  |
|------------|-------------------------|--|------------------|---|-----------------------|------------------|----------------|----------------|--|
| Debt       |                         | Delbert A Sc   |                  |   |                       | Chec             | k if this is:  |                |  |
| Debte (Spo | or 2<br>use, if filing) |  | ,                | <ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul> |                       |                  |                |                |  |
| Unite      | ed States Bankı         | ruptcy Court for the                                 | : NORTH          | ERN DISTRICT OF ILLIN   | OIS                   |                  | MM / DD / YYYY |                |  |
|            | e number                | ., .,  |                  |   |                       |                  |                |                |  |
| (If kn     | own)                    |  |                  |   |                       |                  |                |                |  |
| Of         | ficial Fo               | rm 106J  |                  |   |                       |                  |                |                |  |
|            |                         | J: Your  |                  |   |                       |                  |                | 12/1           |  |
| info       | rmation. If m           |  | eded, atta       | . If two married people ar<br>ch another sheet to this<br>n.  |                       |                  |                |                |  |
| Part       | 1: Describe this a join | ribe Your House                                      | ehold            |   |                       |                  |                |                |  |
|            | ■ No. Go to             |  |                  |   |                       |                  |                |                |  |
|            |                         |  | in a separ       | ate household?  |                       |                  |                |                |  |
|            |                         | -  | st file Offici   | al Form 106J-2, <i>Expense</i> s  | for Separate House    | ehold of Debt    | or 2.          |                |  |
| 2.         |                         | e dependents?  | ■ No             | , ,   |                       |                  |                |                |  |
| ۷.         | Do not list D           | •  | ■ No □ Yes.      | Fill out this information for   | Dependent's relati    | ionship to       | Dependent's    | Does dependent |  |
|            | Debtor 2.               |  | □ 1es.           | each dependent  | Debtor 1 or Debtor    |                  | age            | live with you? |  |
|            | Do not state dependents |  |                  |   |                       |                  |                | □ No<br>□ Yes  |  |
|            | dependents              | names.   |                  |   |                       |                  |                | ☐ Yes          |  |
|            |                         |  |                  |   |                       |                  |                | ☐ Yes          |  |
|            |                         |  |                  |   |                       |                  |                | □ No           |  |
|            |                         |  |                  |   |                       |                  |                | ☐ Yes<br>☐ No  |  |
|            |                         |  |                  |   |                       |                  |                | □ Yes          |  |
| 3.         | expenses o              | penses include<br>f people other t<br>d your depende | han <sub>—</sub> | No<br>Yes   |                       |                  |                | 00             |  |
| Part       | <u> </u>                | ate Your Ongoi                                       |                  | v Evnansas  |                       |                  |                |                |  |
| Esti       | mate your ex            | kpenses as of y                                      | our bankr        | uptcy filing date unless y<br>y is filed. If this is a supp   |                       |                  |                |                |  |
|            |                         |  |                  | government assistance i   |                       |                  |                |                |  |
|            | icial Form 10           |  |                  |   |                       |                  | Your exp       | enses          |  |
| 4.         |                         | or home owners                                       |                  | ses for your residence. In  | nclude first mortgage | e<br>4. \$       |                | 512.00         |  |
|            | If not include          | ded in line 4:                                       |                  |   |                       |                  |                |                |  |
|            | 4a. Real                | estate taxes   |                  |   |                       | 4a. \$           |                | 85.00          |  |
|            | •                       | rty, homeowner'                                      |                  |   |                       | 4b. \$           |                | 40.00          |  |
|            |                         | maintenance, re<br>owner's associa                   |                  | ipkeep expenses   |                       | 4c. \$<br>4d. \$ |                | 0.00           |  |
| 5.         |                         |  |                  | our residence, such as ho   | me equity loans       | 4a. \$<br>5. \$  |                | 0.00           |  |

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| Debtor         | 1 Delbert A Scott, II   | Case num | ber (if known)     |                             |
|----------------|---|----------|--------------------|-----------------------------|
| 6. <b>Ut</b>   | ilities:  |          |                    |                             |
| o. <b>O</b> t  |   | 6a.      | \$                 | 100.00                      |
| 6b             |   | 6b.      | ·                  | 50.00                       |
| 60             |   | 6c.      | ·                  | 150.00                      |
| 6d             |   | 6d.      | ·                  |                             |
|                |   |          | ·                  | 0.00                        |
|                | ood and housekeeping supplies   | 7.       | ·                  | 200.00                      |
|                | nildcare and children's education costs   | 8.       | \$                 | 0.00                        |
| . CI           | othing, laundry, and dry cleaning   | 9.       | \$                 | 0.00                        |
| 0. <b>P</b> e  | ersonal care products and services  | 10.      | \$                 | 0.00                        |
| 1. <b>M</b> o  | edical and dental expenses  | 11.      | \$                 | 50.00                       |
| 2. <b>Tr</b>   | ansportation. Include gas, maintenance, bus or train fare.  |          |                    | 405.00                      |
|                | not include car payments.   | 12.      | •                  | 125.00                      |
| 3. <b>E</b> r  | tertainment, clubs, recreation, newspapers, magazines, and books                                  | 13.      | \$                 | 0.00                        |
| 4. Cł          | naritable contributions and religious donations   | 14.      | \$                 | 0.00                        |
| 5. <b>In</b> : | surance.  |          |                    |                             |
| Do             | o not include insurance deducted from your pay or included in lines 4 or 20.                      |          |                    |                             |
| 15             | a. Life insurance   | 15a.     | \$                 | 0.00                        |
| 15             | b. Health insurance   | 15b.     | \$                 | 0.00                        |
| 15             | c. Vehicle insurance  | 15c.     | ·                  | 67.00                       |
|                | d. Other insurance. Specify:  | 15d.     |                    | 0.00                        |
|                | ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.                   |          | <b>—</b>           | 0.00                        |
|                | necify:   | 16.      | \$                 | 0.00                        |
|                | stallment or lease payments:  |          | <b>—</b>           | 0.00                        |
|                | a. Car payments for Vehicle 1   | 17a.     | \$                 | 0.00                        |
|                | b. Car payments for Vehicle 2   | 17b.     | ·                  | 0.00                        |
|                |   |          | ·                  |                             |
|                | c. Other Specify:   | 17c.     |                    | 0.00                        |
|                | d. Other. Specify:  | 17d.     | \$                 | 0.00                        |
|                | our payments of alimony, maintenance, and support that you did not report as                      | 10       | ¢                  | 0.00                        |
|                | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).                     | 18.      |                    |                             |
|                | her payments you make to support others who do not live with you.                                 |          | \$                 | 0.00                        |
|                | pecify:   | 19.      | _                  |                             |
|                | her real property expenses not included in lines 4 or 5 of this form or on Sche                   |          |                    | 2.22                        |
|                | a. Mortgages on other property  | 20a.     | ·                  | 0.00                        |
|                | b. Real estate taxes  | 20b.     | ·                  | 0.00                        |
| 20             | c. Property, homeowner's, or renter's insurance   | 20c.     | ·                  | 0.00                        |
| 20             | d. Maintenance, repair, and upkeep expenses   | 20d.     | \$                 | 0.00                        |
| 20             | e. Homeowner's association or condominium dues  | 20e.     | \$                 | 0.00                        |
| 1. <b>O</b> t  | her: Specify:   | 21.      | +\$                | 0.00                        |
|                |   |          |                    |                             |
|                | alculate your monthly expenses  |          |                    |                             |
|                | a. Add lines 4 through 21.  |          | \$                 | 1,379.00                    |
| 22             | b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                |          | \$                 |                             |
| 22             | c. Add line 22a and 22b. The result is your monthly expenses.                                     |          | \$                 | 1,379.00                    |
|                |   |          |                    | 1,070.00                    |
|                | alculate your monthly net income.   |          |                    |                             |
| 23             | a. Copy line 12 (your combined monthly income) from Schedule I.                                   | 23a.     | \$                 | 2,337.00                    |
| 23             | b. Copy your monthly expenses from line 22c above.  | 23b.     | -\$                | 1,379.00                    |
|                | • • •   |          |                    | ,                           |
| 23             | c. Subtract your monthly expenses from your monthly income.                                       |          |                    |                             |
| _              | The result is your monthly net income.  | 23c.     | \$                 | 958.00                      |
|                | •   |          |                    |                             |
|                | you expect an increase or decrease in your expenses within the year after yo                      |          |                    |                             |
|                | r example, do you expect to finish paying for your car loan within the year or do you expect your | mortgage | payment to increas | se or decrease because of a |
|                | dification to the terms of your mortgage?   |          |                    |                             |
|                | No.   |          |                    |                             |
|                | Yes. Explain here:  |          |                    |                             |

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| Fill in this in     | formation to identify your                         | case:                    |                |                      |                    |  |     |
|---------------------|--|--------------------------|----------------|----------------------|--------------------|--|-----|
| Debtor 1            | Delbert A Scott, II                                |                          |                |                      |                    |  |     |
|                     | First Name   | Middle Name              | Las            | t Name               |                    |  |     |
| Debtor 2            | ·  |                          |                |                      |                    |  |     |
| (Spouse if, filing) | First Name   | Middle Name              | Las            | t Name               |                    |  |     |
| United States       | Bankruptcy Court for the:                          | NORTHERN DISTRIC         | CT OF ILLINO   | S                    |                    |  |     |
| Case number         |  |                          |                |                      |                    |  |     |
| (if known)          |  |                          |                |                      |                    | ☐ Check if this is an  |     |
|                     |  |                          |                |                      |                    | amended filing   |     |
|                     |  |                          |                |                      |                    |  |     |
| o#: =               | 4000   |                          |                |                      |                    |  |     |
|                     | orm 106Dec   |                          |                |                      |                    |  |     |
| Declara             | ation About a                                      | ın Individua             | al Debte       | or's Scho            | edules             | 12   | /15 |
|                     |  |                          |                |                      |                    |  |     |
| f two married       | d people are filing together                       | r, both are equally resp | oonsible for s | upplying correct     | information.       |  |     |
| Var. must file      | this farm whanever you fi                          | la hankuuntav aahadud    |                | d ookoduloo Ma       | lring a falaa atat | amont concoling property o                                       | _   |
|                     |  |                          |                |                      |                    | ement, concealing property, o<br>00, or imprisonment for up to 2 |     |
|                     | n. 18 U.S.C. §§ 152, 1341, 1                       |                          | and aproy out  | o dan roodii iir iii | 100 up 10 4200,0   | 50, 01 iiiipii.00iiiii0ii 101 up 10 1                            |     |
|                     |  |                          |                |                      |                    |  |     |
|                     |  |                          |                |                      |                    |  |     |
| 5                   | Sign Below   |                          |                |                      |                    |  |     |
|                     |  |                          |                |                      |                    |  |     |
| Did you             | pay or agree to pay some                           | one who is NOT an att    | orney to help  | you fill out bank    | ruptcy forms?      |  |     |
| ■ No                |  |                          |                |                      |                    |  |     |
| □ Yes               | s. Name of person                                  |                          |                |                      | Attach <i>Bar</i>  | nkruptcy Petition Preparer's Notic                               | e   |
|                     |  |                          |                |                      |                    | n, and Signature (Official Form 1                                |     |
|                     |  |                          |                |                      |                    |  |     |
| l lucale a se       |  | 4h a4 1 h a              |                | alaadudaa filaduu    | :41-41-1-4-1-4-1   |  |     |
|                     | enalty of perjury, I declare are true and correct. | that I have read the Su  | immary and s   | chedules filed w     | ith this deciarati | on and   |     |
|                     | aro trao aria corrocti                             |                          |                |                      |                    |  |     |
|                     | Delbert A Scott, II                                |                          | X              |                      |                    |  |     |
|                     | pert A Scott, II                                   |                          |                | Signature of Deb     | otor 2             |  |     |
| Sign                | ature of Debtor 1                                  |                          |                |                      |                    |  |     |
| Date                | November 13, 2017                                  |                          |                | Date                 |                    |  |     |
|                     |  |                          |                |                      |                    |  |     |

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| Fill                | in this inform   | nation to identify you                     | r case:  |   |   |   |  |  |  |  |  |  |
|---------------------|--|--|--|---|---|---|--|--|--|--|--|--|
| Deb                 | otor 1   | Delbert A Scott, I                         |  | Last Name   |   |   |  |  |  |  |  |  |
| Deb                 | otor 2   | First Name                                 | Middle Name  | Last Name   |   |   |  |  |  |  |  |  |
|                     | use if, filing)  | First Name                                 | Middle Name  | Last Name   |   |   |  |  |  |  |  |  |
| Uni                 | ted States Bar   | nkruptcy Court for the:                    | NORTHERN DISTRICT (  | OF ILLINOIS   |   |   |  |  |  |  |  |  |
|                     | se number  |  |  |   |   | theck if this is an<br>mended filing                  |  |  |  |  |  |  |
| Sta<br>Be a<br>info | s complete a   | of Financial                               | attach a separate sheet to   | re filing together, both are                          | ankruptcy<br>equally responsible for sup<br>additional pages, write you |   |  |  |  |  |  |  |
|                     | <u> </u>   | ,  | nrital Status and Where You  | Lived Before  |   |   |  |  |  |  |  |  |
| 1.                  | What is your   | current marital statu                      | ıs?  |   |   |   |  |  |  |  |  |  |
|                     | <ul><li>□ Married</li><li>■ Not mar</li></ul>  | ried                                       |  |   |   |   |  |  |  |  |  |  |
| 2.                  | During the la  | ast 3 years, have you                      | lived anywhere other than  | where you live now?                                   |   |   |  |  |  |  |  |  |
|                     | <ul><li>■ No</li><li>□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul> |  |  |   |   |   |  |  |  |  |  |  |
|                     | Debtor 1 Pr  | ior Address:                               | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:  | Dates Debtor 2<br>lived there                         |  |  |  |  |  |  |
| <b>3.</b><br>state  |  |  |  |   | ity property state or territory<br>co, Texas, Washington and W          |   |  |  |  |  |  |  |
|                     | ■ No □ Yes. Ma   | ke sure you fill out <i>Scl</i>            | nedule H: Your Codebtors (O  | fficial Form 106H).                                   |   |   |  |  |  |  |  |  |
| Par                 | t 2 Explai   | n the Sources of You                       | r Income   |   |   |   |  |  |  |  |  |  |
| 4.                  | Fill in the tota   | I amount of income yo                      | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part-                       |   | ndar years?   |  |  |  |  |  |  |
|                     | □ No ■ Yes. Fill   | in the details.                            |  |   |   |   |  |  |  |  |  |  |
|                     |  |  | Debtor 1   |   | Debtor 2  |   |  |  |  |  |  |  |
|                     |  |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                              | Gross income<br>(before deductions<br>and exclusions) |  |  |  |  |  |  |
|                     |  | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips  | \$30,000.00   | ☐ Wages, commissions, bonuses, tips                                     |   |  |  |  |  |  |  |
|                     |  |  | ☐ Operating a business   |   | ☐ Operating a business  |   |  |  |  |  |  |  |

Official Form 107

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|    |   |  |  | Debtor 1   |  |  | Debtor 2   |  |   |
|----|---|--|--|--|--|--|--|--|---|
|    |   |  |  | Sources of income<br>Check all that apply.   |  | s income<br>re deductions and<br>sions)  | Sources of inc   |  | Gross income<br>(before deductions<br>and exclusions) |
|    | r last calend<br>Inuary 1 to l            |  | 31, 2016 )   | ■ Wages, commissions, bonuses, tips  |  | \$65,998.00  | ☐ Wages, combonuses, tips  | nmissions,   |   |
|    |   |  |  | ☐ Operating a business   |  |  | ☐ Operating a  | business   |   |
|    | r the calend<br>nuary 1 to l              |  |  | ■ Wages, commissions, bonuses, tips  |  | \$72,319.00  | ☐ Wages, combonuses, tips  | ımissions,   |   |
|    |   |  |  | ☐ Operating a business   |  |  | ☐ Operating a  | business   |   |
|    | and other p<br>winnings. I<br>List each s | oublic benef<br>f you are fili           | it payments;<br>ng a joint cas<br>ne gross inco  | ner that income is taxable. Exapensions; rental income; interie and you have income that you me from each source separate  | est; divid<br>ou recei   | lends; money colleved together, list it  | cted from lawsuits;<br>only once under D   | royalties; an<br>ebtor 1.  |   |
|    |   |  |  | Debtor 1   |  |  | Debtor 2   |  |   |
|    |   |  |  | Sources of income Describe below.  | each   | s income from<br>source<br>re deductions and<br>sions)   | Sources of ind<br>Describe below   |  | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: List                                | Certain Pay                              | ments You  | Made Before You Filed for I  | Bankrup  | tcy  |  |  |   |
| 6. | □ No.                                     | Neither De individual puring the No. Yes | btor 1 nor E<br>rimarily for a<br>90 days befor<br>Go to line 7<br>List below 6<br>paid that crinot include<br>o adjustment<br>r Debtor 2 o<br>90 days befor<br>Go to line 7<br>List below 6 | each creditor to whom you paideditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years or both have primarily consume you filed for bankruptcy, dieseach creditor to whom you paideditor. | d you pa d a total ats for do his bankr s after th amer dek d you pa | ots. Consumer deb se."  y any creditor a tota of \$6,425* or more mestic support obli uptcy case. at for cases filed or ots. y any creditor a tota of \$600 or more an | in one or more pay<br>gations, such as claim or after the date of \$600 or more? | ore?  yments and the thild support and the things of adjustment and the you paid the the things of t | the total amount you and alimony. Also, do t.         |
|    |   |  | include pay  | ments for domestic support of this bankruptcy case.  |  |  |  |  |   |
|    | Creditor's                                | s Name and                               | Address  | Dates of payme   | nt   | Total amount paid  | Amount you still owe   | Was this   | payment for   |

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Case number (if known) Debtor 1 Delbert A Scott, II

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |   |                       |                      |                    |                       |  |  |  |  |
|-----|--|---|-----------------------|----------------------|--------------------|-----------------------|--|--|--|--|
|     | ☐ Yes. List all payments to an insider.  |   |                       |                      |                    |                       |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid     | Amount you still owe | Reason for         | this payment          |  |  |  |  |
| 8.  | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos  |   | ments or transfer a   | any property on a    | ccount of a d      | ebt that benefited an |  |  |  |  |
|     | Yes. List all payments to an insider   |   |                       |                      |                    |                       |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment  | Total amount paid     | Amount you still owe | Reason for         | this payment          |  |  |  |  |
|     |  |   | para                  |                      | moduco oroc        | and o name            |  |  |  |  |
| Pai | t 4: Identify Legal Actions, Repossession  | s, and Foreclosures                                     |                       |                      |                    |                       |  |  |  |  |
| 9.  | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.  |   |                       |                      |                    |                       |  |  |  |  |
|     | Case title   | Nature of the case                                      | Court or agency       |                      | Status of th       | 10 0350               |  |  |  |  |
|     | Case number  | Nature of the case                                      | Court or agency       |                      | Status of th       | ie case               |  |  |  |  |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.   |   | erty repossessed, f   | oreclosed, garnis    | hed, attache       | d, seized, or levied? |  |  |  |  |
|     | Creditor Name and Address Describe the Property Dat  |   |                       |                      |                    | Value of the          |  |  |  |  |
|     |  | Explain what happened                                   | 1                     |                      | property           |                       |  |  |  |  |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No   |   |                       |                      |                    |                       |  |  |  |  |
|     | Yes. Fill in the details.  Creditor Name and Address   | Describe the action the                                 | oroditor took         | Data                 | action was         | Amount                |  |  |  |  |
|     | Creditor Name and Address  | Address Describe the action the creditor took Date take |                       |                      |                    |                       |  |  |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No ☐ Yes  |   | erty in the possess   | ion of an assigne    | e for the ben      | efit of creditors, a  |  |  |  |  |
| Pai | t 5: List Certain Gifts and Contributions  |   |                       |                      |                    |                       |  |  |  |  |
|     | Within 2 years before you filed for bankrup  | toy did you give any gifts                              | s with a total value  | of more than \$60    | O por porson       | 2                     |  |  |  |  |
| 13. | ■ No   | icy, did you give any gind                              | s willi a lolai value | oi more man \$00     | o per person       | ·                     |  |  |  |  |
|     | Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  | Describe the gifts                                      |                       | Dates<br>the g       | s you gave<br>ifts | Value                 |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |   |                       |                      |                    |                       |  |  |  |  |

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| 14. | Nithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No  Yes. Fill in the details for each gift or contribution.  |         |  |                         |  |                           |  |  |  |
|-----|---|---------|--|-------------------------|--|---------------------------|--|--|--|
|     | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Contributions of the Contributions of th | total   | Describe what you contributed  |                         | Dates you contributed                    | Value                     |  |  |  |
| Pai | t 6: List Certain Losses  |         |  |                         |  |                           |  |  |  |
| 5.  | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?   |         |  |                         |  |                           |  |  |  |
|     | ■ No  |         |  |                         |  |                           |  |  |  |
|     | ☐ Yes. Fill in the details.   |         |  |                         |  |                           |  |  |  |
|     | Describe the property you lost and how the loss occurred  | Includ  | ribe any insurance coverage for the I<br>te the amount that insurance has paid.<br>Ince claims on line 33 of Schedule A/B: | List pending            | Date of your loss                        | Value of property<br>lost |  |  |  |
| Dai | 4.7. Liet Cartein Deumente en Transfe   |         | ince ciaims on line 33 of ochedule A/D.  | r τορ <del>ο</del> τιγ. |  |                           |  |  |  |
| Pal | t 7: List Certain Payments or Transfer  | 5       |  |                         |  |                           |  |  |  |
|     | Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.   | prepari | ing a bankruptcy petition?   |                         |  |                           |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not   | You     | Description and value of any property transferred  |                         | Date payment or transfer was made        | Amount of payment         |  |  |  |
|     | Eric Pratt Law Firm P.C.<br>5301 E. State St, Ste 116<br>Rockford, IL 61108   |         | Attorney Fees  |                         |  | \$0.00                    |  |  |  |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.   |         |  |                         |  |                           |  |  |  |
|     | Person Who Was Paid<br>Address  |         | Description and value of any property transferred  |                         | Date payment or transfer was made        | Amount of payment         |  |  |  |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.   |         |  |                         |  |                           |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |         |  |                         |  |                           |  |  |  |
|     | Person Who Received Transfer Address  |         | Description and value of property transferred  |                         | iny property or received or debts change | Date transfer was made    |  |  |  |
|     | Person's relationship to you  |         |  |                         |  |                           |  |  |  |

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Within 10 years before you filed for bankruptoy, did you transfer any property to a solf cottled trust or similar device of which you are a

Debtor 1 Delbert A Scott, II

| 19. | beneficiary? (These are often called asset-pro   |   | у ргорену ю а                      | Sen-Seur   | eu trust of Sillillar device                         | or writeri you are a                          |
|-----|--|---|------------------------------------|------------|--|---|
|     | ☐ Yes. Fill in the details.  |   |                                    |            |  |   |
|     | Name of trust  | Description and v   | alue of the pro                    | perty tran | sferred  | Date Transfer was made                        |
| Pa  | tt 8: List of Certain Financial Accounts, Ins  | truments, Safe Deposit  | Boxes, and St                      | orage Uni  | its  |   |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated No | r other financial accour                                      | nts; certificates                  | of depos   |  |   |
|     | Yes. Fill in the details.  |   |                                    |            |  |   |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)   | Last 4 digits of account number                               | Type of according trument          | unt or     | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | ear before you filed for                                      | bankruptcy, ar                     | ny safe de | posit box or other depos                             | sitory for securities,                        |
|     | ■ No □ Yes. Fill in the details.   |   |                                    |            |  |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, S<br>State and ZIP Code) | r, Street, City,                   |            | Do you still have it?                                |   |
| 22. | Have you stored property in a storage unit o  ■ No □ Yes. Fill in the details.   | r place other than your                                       | home within 1                      | year befo  | re you filed for bankrupt                            | cy?   |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | to it?  | S (Number, Street, City, ZIP Code) |            | Do you still have it?                                |   |
| Pa  | rt 9: Identify Property You Hold or Control  | for Someone Else  |                                    |            |  |   |
| 23. | Do you hold or control any property that sor for someone.  | meone else owns? Inclu  | ude any proper                     | ty you boı | rrowed from, are storing                             | for, or hold in trust                         |
|     | ■ No □ Yes. Fill in the details.   |   |                                    |            |  |   |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the prop<br>(Number, Street, City, S<br>Code)        |                                    | Describe   | the property   | Value   |
| Pai | rt 10: Give Details About Environmental Info   | ormation  |                                    |            |  |   |
| For | the purpose of Part 10, the following definition   | ons apply:  |                                    |            |  |   |
|     | Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these                                  | e air, land, soil, surface                                    | e water, ground                    | • .        |  |   |
|     | Site means any location, facility, or property to own, operate, or utilize it, including dispo   | •   | environmental l                    | aw, wheth  | ner you now own, operat                              | e, or utilize it or used                      |
|     | Hazardous material means anything an envi  | ronmental law defines   | as a hazardous                     | waste, ha  | azardous substance, tox                              | ic substance,                                 |

Official Form 107

hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Delbert A Scott, II

| Environmental law, if you Date of notice know it   |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| ial?   |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Environmental law, if you Date of notice know it   |  |  |  |  |  |  |  |
| y environmental law? Include settlements and orders.   |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Nature of the case Status of the case  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| ave any of the following connections to any business?  |  |  |  |  |  |  |  |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  |  |  |  |  |  |  |  |
| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| ☐ An officer, director, or managing executive of a corporation   |  |  |  |  |  |  |  |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| siness.  |  |  |  |  |  |  |  |
| iness Employer Identification number Do not include Social Security number or ITIN.  |  |  |  |  |  |  |  |
| peper Dates business existed   |  |  |  |  |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| i i  |  |  |  |  |  |  |  |

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1 Delbert A Scott, II

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,717

\$1,167 filing fee \$550 administrative fee

total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$343.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: November 13, 2017                | J 11 V                     |
|--|----------------------------|
| Signed:                                |                            |
| /s/ Delbert A Scott, II                | /s/ Jacob Maegli           |
| Delbert A Scott, II                    | Jacob Maegli 6317153       |
|  | Attorney for the Debtor(s) |
| Debtor(s)                              |                            |
| Do not sign this agreement if the amou | unts are blank.            |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

| In 1   | re       | Delbert A Scott, I                | I                     |   | Case No.                 |                                     |
|--|----------|-----------------------------------|-----------------------|---|--------------------------|-------------------------------------|
|  | •        |                                   |                       | Debtor(s)   | Chapter                  | 13                                  |
|  |          | DISC                              | L(                    | SURE OF COMPENSATION OF ATTORNI   | EY FOR DI                | EBTOR(S)                            |
| 1.   | cor      | npensation paid to m              | ie w                  | 19(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for ithin one year before the filing of the petition in bankruptcy, or a e debtor(s) in contemplation of or in connection with the bankrup | greed to be paid         | to me, for services rendered or to  |
|  |          | For legal services,               | I ha                  | ave agreed to accept  | \$                       | 4,000.00                            |
|  |          | Prior to the filing of            | of th                 | nis statement I have received   | \$                       | 0.00                                |
|  |          | Balance Due                       |                       |   | \$                       | 4,000.00                            |
| 2.   | \$_      | 310.00 of the fil                 | ing                   | fee has been paid.  |                          |                                     |
| 3.   | The      | e source of the comp              | ens                   | ation paid to me was:   |                          |                                     |
|  |          | ■ Debtor                          |                       | Other (specify):  |                          |                                     |
| 4.   | The      | e source of compensa              | atio                  | n to be paid to me is:  |                          |                                     |
|  |          | ■ Debtor                          |                       | Other (specify):  |                          |                                     |
| 5.   |          | I have not agreed to              | sh                    | are the above-disclosed compensation with any other person unle   | ss they are mem          | bers and associates of my law firm. |
| ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. |          |                                   |                       |   |                          |                                     |
| 6.   | In       | return for the above-             | dis                   | closed fee, I have agreed to render legal service for all aspects of  | the bankruptcy           | case, including:                    |
|  | b.<br>c. | Preparation and filir             | ng o<br>ne de<br>s ne |   | be required;             |                                     |
| 7.   | Ву       | agreement with the Representation | deb<br>on             | tor(s), the above-disclosed fee does not include the following servor the debtors in any dischargeability actions, relief from sta  | rice:<br>y actions or ar | ny other adversary proceeding.      |
|  |          | See Attached                      | d C                   | ARA   |                          |                                     |
|  |          |                                   |                       | CERTIFICATION   |                          |                                     |
| this   |          | ertify that the foregoing.        | ing                   | is a complete statement of any agreement or arrangement for pays  | ment to me for r         | representation of the debtor(s) in  |
|  | Nov      | ember 13, 2017                    |                       | /s/ Jacob Maegli  |                          |                                     |
|  | Date     | :                                 |                       | Jacob Maegli 6317153  | 1                        |                                     |
|  |          |                                   |                       | Signature of Attorney<br>Eric Pratt Law Firm P.0  | <b>)</b> .               |                                     |
|  |          |                                   |                       | 5301 E. State St, Ste 1   |                          |                                     |
|  |          |                                   |                       | Rockford, IL 61108  |                          |                                     |
|  |          |                                   |                       | Name of law firm  |                          |                                     |

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### United States Bankruptcy Court Northern District of Illinois

| In re | Delbert A Scott, II   | Debtor(s)   | _ Case No Chapter | 13 |  |  |  |
|-------|---|---|-------------------|----|--|--|--|
|       | VER   | RIFICATION OF CREDITOR MA                                       | •                 |    |  |  |  |
|       |   | Number of C   |                   | 19 |  |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |                   |    |  |  |  |
| Date: | November 13, 2017   | /s/ Delbert A Scott, II Delbert A Scott, II Signature of Debtor |                   |    |  |  |  |

Advia Credit Union 550 S Riverview Dr Parchment, MI 49004

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One 15000 Capital One Dr Richmond, VA 23238

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Po Box 15298 Wilmington, DE 19850

Chase Mtg Po Box 24696 Columbus, OH 43224

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63129

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank/eldrbrmn Po Box 182125 Columbus, OH 43218 Discover Financial Po Box 3025 New Albany, OH 43054

Elan Financial Service Po Box 108 Saint Louis, MO 63166

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

OneMain Financial Attn: Bankruptcy Department 601 Nw 2nd St #300 Evansville, IN 47708

Syncb/citgo Po Box 965060 Orlando, FL 32896

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896